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FM AMCONSUL CALCUTTA

TO RUEHC/SECSTATE WASHDC PRIORITY 0857

INFO RUEHNE/AMEMBASSY NEW DELHI PRIORITY 0795

RUEHBI/AMCONSUL MUMBAI 0314

RUEHCG/AMCONSUL CHENNAI 0314

RUEHKA/AMEMBASSY DHAKA 0183

RUEHKT/AMEMBASSY KATHMANDU 0187

RUEHIL/AMEMBASSY ISLAMABAD 0131

RUEHLH/AMCONSUL LAHORE 0071

RUEHKP/AMCONSUL KARACHI 0073

RUEHCN/AMCONSUL CHENGDU 0010

RUEHGO/AMEMBASSY RANGOON 0109

RUEHPH/CDC CDC ATLANTA GA PRIORITY

RHMFIUU/CDR USPACOM HONOLULU HI

RUEHC/USAID WASHDC

RUEAIIA/CIA WASHDC

RUEHGV/USMISSION GENEVA 0025

RUCNDT/USMISSION USUN NEW YORK 0019

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SUBJECT: BIHAR GOVERNMENT STRUGGLES TO ERADICATE POLIO AND FACES INCREASING HIV/AIDS

¶1. (SBU) Summary. On March 23 CG had introductory meetings with recently elected Bihar Chief Minister Nitish Kumar and his senior officials to discuss the new state government's economic development, public health and security initiatives. Kumar and other contacts expressed a strong interest in attracting investment in agro-business, health care and education. In public health, greater attention was being made to eliminate polio in Bihar as it has one of the highest concentrations of new infections in the country. Also, state officials are concerned that HIV/AIDS infection rates have been increasing to three times epidemic rates in some rural villages. The government is responding to the serious Maoist insurgency in the state by attempting more effective social services with a program termed "Government at Your Doorstep." Kumar, his ministers and senior officials seem energized to improve governance in Bihar but the damage from 15 years of misrule by former Chief Ministers Lalu Prasad Yadav and his wife Rabri Devi will take time to correct. End Summary.

¶2. (SBU) CG met Kumar to personally congratulate him on his victory in the November 2005 state assembly elections and to discuss his new government's plans. Bihar is India's poorest state, with 43 percent of its population living on less than a dollar a day and a child mortality rate of 34.3 percent. However, it is the second largest vegetable producing state in the country and a leading maize producer. Because of the state's agricultural dominance, Kumar noted he had a strong desire to promote agro-business and to revive the dormant sugar industry. In separate meetings, Deputy Chief Minister Sushil Kumar Modi, Chief Secretary G.S. Kang and Cooperatives Secretary B.B. Shrivastava echoed the CM's comments. According to Kang, Iowa State University has shown interest in joint agricultural research with Rajendra Agricultural University, Pusa. To facilitate investment, Deputy CM Modi said that the state government would establish a "single window clearing" process to expedite establishing businesses. As a neutral observer, Confederation of Indian Industries (CII) Bihar Chapter President Pramod Sharma expressed general satisfaction with the new Bihar government's initial efforts to promote business and better governance. Kumar and others also expressed a strong interest

in developing healthcare and education, sectors in which Bihar lacks adequate facilities. Health Minister Chandramohan Rai said that construction would start in April 2006 on a major All India Institute of Medical Science (AIIMS). In addition, private sector investment in health and education would be encouraged.

¶13. (SBU) Bihar's severe poverty has contributed to serious public health problems such as polio and HIV/AIDS. According to the latest statistics from the Bihar office of the United Nations Children's Fund (UNICEF), Bihar accounted for 28 of India's 63 polio infections in 2005 and cases have been exported from Bihar to Jharkhand, Punjab and Nepal. In January CG contacted Chief Secretary Kang to express USG concerns about the Bihar government's failure to implement an effective polio immunization program. Since then, the Bihar government, UNICEF and the World Health Organization (WHO) have implemented two rounds of immunization. UNICEF Health Officer Dr. Vijay Moses said that the new Bihar government is now more serious in implementing the immunization programs. CM Kumar is personally monitoring the polio eradication drives and has identified preventing new infections as his highest priority. Kumar has also been in regular contact through video conferencing with the District Magistrates to impress upon them the importance of the immunization drives and he has refused to grant any leaves to medical officers during the immunization periods. Even with the increased attention, three new polio cases have been identified since the beginning of the year. Dr. Moses said it was not clear whether the recent cases were the result of infections in 2005, or actually from the 2006. Additional rounds of immunization are planned for April 9 and later in May.

¶14. (SBU) Disturbing trends are also emerging in HIV/Aids infection rates in Bihar. The lack of adequate health care infrastructure has made effective tracking of infection rates

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difficult. Until recently, the National AIDS Control Organization (NACO) reported a prevalence rate of .13 percent for HIV/AIDS infections in the state. Two studies published in March of surveys done by the Bihar State Aids Control Society (BSACS) in 38 districts in July 2005 and December 2005 found a dramatically increased prevalence rate of .53 percent. Bihar now has reportedly 8,128 people diagnosed HIV positive and about 1,070 cases of AIDS. A senior BSCAS official was quoted by the Times News Network as saying, "The rate at which infection is spreading, very soon, it may cross the 1 percent prevalence rate." Some districts have infection rates that significantly exceed epidemic levels: Sitamarhi and East Champaran have rates of 3.7 percent and 2.28 percent respectively. Health Minister Rai noted that the infections are concentrated in areas that are a source of migrant labor for the rest of India. According to the Institute of Human Development, New Delhi's report "Rural Labor Migration From Bihar," 48 percent of all Bihar households reported at least one family member who was a short-term migrant. Bihar appears to be developing into a reservoir and potential source of future HIV/AIDS infections for India, just as it has for polio.

¶15. (SBU) Kumar and others admitted that the ongoing Maoist insurgency continues to be another major concern. Kumar said that he sees development as the best response to the Maoists. By improving his government's delivery of basic services to the poor communities most affected by the Maoists, he hopes to dry up potential pockets of support. One of the programs recently initiated was "Government at Your Doorstep," in which state officials go to villages highlighting various state development programs. The initiative was inaugurated in Jehanabad, where in November 2005, 300 Maoists attacked a prison and released all the inmates.

¶16. (SBU) Comment: Kumar and his senior officials appear serious in wanting to implement positive change in Bihar. However, the damage of 15 years of poor governance by former Chief Ministers Lalu Prasad Yadav and his wife Rabri Devi will require significant effort and time to correct. Fundamental

problems will be difficult to resolve, such as the lack of development, inadequate health care and a persistent insurgency.

Kumar's initial efforts to address polio are encouraging and will hopefully bring an end to further infections in the state. However, HIV/AIDS constitutes an emerging issue that given the lack of resources and awareness will see little immediate improvement. If the pattern holds with HIV/AIDs as was demonstrated in the case of polio, HIV/AIDS infections will likely increase and Bihar will potentially become a source for infections elsewhere in India.

JARDINE